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Complete if Known Substitute for form 1449/PTO Application Number Filing Date 750142003 INFORMATION DISCLOSURE First Named Inventor WOLFF, Larry Lee STATEMENT BY APPLICANT Art Unit (Use as many sheets as necessary) **Examiner Name** Attorney Docket Number

			U. S. PATENT	DOCUMENTS	
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
<del></del>		Number-Kind Code <sup>2</sup> (* known)			Figures Appear
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Art Unit

STATEMENT BY APPLICANT (Use as many sheets as necessary)

Sheet |3

**Examiner Name** Attorney Docket Number

			U. S. PATENT		
Examiner Initials*	Cite No. <sup>1</sup>	Document Number  Number-Kind Code <sup>2 (# known)</sup>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Initials*	No.1	\		Date Applicant of Cited Document	Where Relevant Passages Or Relevant Figures Appear
		Country Code <sup>3</sup> Number <sup>4</sup> Kind Code <sup>5</sup> (if ke	nown)	32111	Of Relevant Figures Appear
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